



ADDITIONAL DOG HOUSEHOLD PERMIT

Applicant Name: _____

Applicant Address: _____

Applicant Phone: _____

Applicant E-Mail Address: _____

- ☐ Check this box if all of your dogs are licensed;
- ☐ Check this box if all of your dogs are spayed/neutered;
- ☐ Check this box if you have a fully fenced yard of at least 450 square feet that is capable for containing all of your dogs;

____ Please identify the number of photos submitted (photos of fenced yard must be included with application)

I agree to the terms for an Additional Dog Household Permit as outlined in Kanab City General Ordinance 13-200.02.170, and I understand that the permit will be revoked for failure to maintain the requirements of the permit or for convictions of animal related infractions as listed in the referenced ordinance.

Applicant Signature

Property Owner Signature (required if Applicant does not own the property)

For Office Use Only

Date Received: _____

\$40 Fee Paid ☐

Date Approved: _____

Date Denied: _____

Cause for Denial: _____

Animal Control Officer Signature: _____